

TELEPHONE (312) 258-5500



**SCHIFF, HARDIN LLP**

PATENT DEPARTMENT  
6600 SEARS TOWER  
233 SOUTH WACKER DRIVE  
CHICAGO, ILLINOIS 60606

IN RE APPLICATION OF: Tom Weidner GROUP ART UNIT: 2646  
SERIAL NO.: 10/659,230 EXAMINER: Daniel Swerdlow  
FILED: September 10, 2003 CONFIRMATION NO.: 3480

TITLE: "FEEDBACK COMPENSATION METHOD AND CIRCUIT FOR AN ACOUSTIC AMPLIFICATION SYSTEM, AND HEARING AID DEVICE EMPLOYING SAME"

**AMENDMENT "A"**

**MAIL STOP AMENDMENT**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
SIR:

Transmitted herewith is an amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below.

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	*69	MINUS	69	X	( ) X 25.00 ( ) X 50.00	
INDEP. CLAIMS	*3	MINUS	3	X	( ) X 100.00 ( ) X 200.00	
Application amended to contain any multiple dependent claims not previously paid for.				( ) YES ( ) NO	( ) \$180.00 ( ) \$360.00 ONE TIME	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$0.00

\* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 write "20" in this space.

- ☐ Applicants petition the Commissioner of Patents and Trademarks to extend this time for response to the Office Action dated \_\_\_\_\_ for \_\_\_\_\_ months so that the period for response is extended to \_\_\_\_\_. A check in the amount of \$\_\_\_\_\_ is attached to cover the cost of the extension. Any deficiency or overpayment should be charged or credited to deposit account No. 501519. A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of \$\_\_\_\_\_ is attached.
- ☐ A check for \$\_\_\_\_\_ accompanying IDS under 37 CFR 1.97(c) is attached
- ☐ A check for \$\_\_\_\_\_ and Petition for Consideration of IDS under 37 CFR 1.97(d) is attached.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or to credit any overpayment to account No. 501519. A duplicate of this sheet is enclosed.
- When phoning re this application, please call (312) 258-5500.

SCHIFF, HARDIN LLP (Customer Number: 26574)

Patent Department

BY

*Steven H. Noll*

(28,982)

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on April 19, 2006

Steven H. Noll

NAME OF APPLICANT'S ATTORNEY

*Steven H. Noll*

SIGNATURE

April 19, 2006

DATE



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**AMENDMENT "A"**

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P.O. Box 1450  
Alexandria, Virginia 22313-1450

S I R:

In response to the Office Action dated January 23, 2006, Applicant herewith amends the application as follows.